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PRODUCER  Local Agent	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
•	COMPANIES AFFORDING COVERAGE
INSURED	COMPANY A Your Insurance Company
	COMPANY B Your Insurance Company
Your Name	COMPANY C Your Insurance Company
	COMPANY D Your Insurance Company
	COMPANY F Your Insurance Company

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INBURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH APPLICIES. LIMITS SHOWN MAY HAVE BEEN REDIVED BY PAID CLAIMS

AFFORDED BY THE FOR	THE REPUBLICATION OF THE PROPERTY OF THE PROPE	BY BAID O AIMS.
POLICIES, LIMITS SHOW	N MAY HAVE BEEN REDUCED	BI FAIR OF CHICK

CO LTR	S. LIMITS SHOWN MAY HAVE BEEN REI	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	P4 000 00 <sup>2</sup>
	GENERAL LIABILITY				GENERAL AGGREGATE	\$1,000,000
	X COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG	\$1,000,000
		XYZ - 123	04/01/XX	04/01/XY	PERSONAL & ADV INJURY	\$1,000,000
	CLAIMS MADE X OCCUR	A.E			EACH OCCURRENCE	\$1,000,000
A	OWNER'S & CONT PROT		Į į		FIRE DAMAGE (Any one fire)	\$ 50,000
	X Include Independent Contractors		1		MED EXP (Any one person)	\$ 5,000
	X XCU Coverage					
	AUTOMOBILE LIABILITY		İ		COMBINED SINGLE LIMIT	\$1,000,000
	X ANY AUTO					
	X ALL OWNED AUTOS			0.410.4007	BODILY INJURY (Per Person)	\$1,000,000
В	X SCHEDULED AUTOS	ABC-345	04/01/XX	D4/01/XY	BODIE! HESSIT (F. S. F. G.	
	X HIRED AUTOS		]		BODILY INJURY (Per accident)	\$1,900,000
	X NON-OWNED AUTOS				BODET MOOTH, (C. 2.2.2.4)	
	X GARAGE LIABILITY		1	}	PROPERTY DAMAGE	\$1,000,000
					EACH OCCURRENCE	\$1,000,000
	EXCESS LIABILITY	İ		04/01/XY	AGGREGATE	\$1,000,000
	X UMBRELLA FORM	LLL-555	04/01/XX	0-2011/21		\$
C	OTHER THAN UMBRELLA FORM				DISTATUTORY LIMITS	
	WORKERS COMPENSATION		1			
	AND	1			EACH ACCIDENT	\$ 100,000
	1 '***	WCP-678	04/01/XX	04/01/XY	DISEASE - POLICY LIMIT	\$ 100,000
D	EMPLOYERS' LIABILITY				DISEASE - EACH EMPLOYEE	\$ 100,000
	OTHER					Limit: \$2,000,00
E	NYS Disability Benefits	DBL-910	04/01/XX	04/01/XY	STATUTORY	SIR: 100,00
F	Professional LiabRity	PPL-111	04/01/XX	04/01/XY		PMC: 100,00

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS Waiver of Subrogation for Workers Comp. & General Liability	
DASNY CONTRACT NO	_

Dormitory Authority-State of New York 161 Delaware Avenue Delmar, NY 12054 Attn: Risk Management Unit

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SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE	
EXPIRATION DATE THEREOF, THE ISSUING COMPANY XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO TH	臣
LEFT)000000000000000000000000000000000000	(
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	(
AUTHORIZED REPRESENTATIVE Your Representative	

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	GENERAL LIABILITY	<u> </u>	1	1	PRODUCTS-COMP/OP AGG	<del>  •</del>
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	AND	]	1	1	EACH ACCIDENT	\$
	EMPLOYERS' LIABILITY	1		1	DISEASE - POLICY LIMIT	\$
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	Professional Liability			 
DESCRI DASNY	PTION OF OPERATIONS/LOCATIONS/VEHIC CONTRACT NO.	LES/SPECIAL ITEMS PROJECT NAME	FACILITY:	

AAP-111

04/01/XX

04/01/XY

Dormitory Authority-State of New York 161 Delaware Avenue Delmar, NY 12054 Attn: Risk Management Unit

Asbestos Abatement

OTHER

Residence to the second of the SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE AUTHORIZED REPRESENTATIVE Your Representative

Limit: \$2,000,000

100,000

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	AUTOMOBILE LIABILITY			<u> </u>		<del> </del>
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A	Environmental Engineers & Consultants	1				Limit: \$2,000,000
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DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS FAI DASNY CONTRACT NOPROJECT NAME:	CILITY:
Dormitory Authority-State of New York 161 Delaware Avenue Delmar, NY 12054 Attn: Risk Management Unit	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

# DORMITORY AUTHORITY - STATE OF NEW YORK

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City	Contact Person	Telephone	<del></del>
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# CONSULTANT'S UTILIZATION PLAN

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# CONSULTANT'S PERMANENT EMPLOYEE DISTRIBUTION

DORMITORY AUTHORITY - STATE OF NEW YORK

CONSULTANT	IDENTIFICA	TION					End T	O No		
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# CONSULTANT'S BID-CONTRACT ACTIVITY SUMMARY WITH MINORITY- AND WOMEN-OWNED BUSINESS ENTERPRISES

# DORMITORY AUTHORITY - STATE OF NEW YORK

Person  V  E \$ WI  N-OWNED BUSINES	S BID AND CON  Value of Propose Date of Award, 1 Contract Status: Type of Firm:  Value of Propose Contract Status: Type of Firm:  Value of Propose Date of Propose Date of Award, 1	Contract Amount Contract Number MBE Goal Status: WBE Goal Status: NTRACT ACTIVIT  al/Bid Received or Award Pending or Eliminated Acti MBE   WBE  al/Bid Received or Award	SOver Over Y SUMM	Under Under IARY
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## CONSULTANT'S COMPLIANCE REPORT

DORMITORY AUTHORITY - STATE OF NEW YORK

NSULTANT II	DENTIFICATION				
Firm				Fed ID No	<del></del>
Address					<del> </del>
Address					
City				Zip	
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Work Descri			Estima	ated	
Completion 1	Percent: 25% 50% 75%	• 100%	Comp	letion Date _	
ORITY- ANI	) WOMEN- OWNED BUSINESS				
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# CONSULTANT'S REQUEST FOR WAIVER

DORMITORY AUTHORITY - STATE OF NEW YORK
Office For Affirmative Action
One Penn Plaza, 48th Floor

New York, New York 10119-0118 ☐ Partial. If Partial, complete blanks below: ☐ Total TYPE OF WAIVER REQUEST: MBE Waiver (%) Requested\_\_\_\_\_ WBE Waiver (%) Requested\_\_\_\_\_ CONSULTANT B. Firm Address State Zip \_ City Telephone \_\_\_\_\_ C. **PROJECT** \_\_\_\_\_ Contract Amount Project \_\_\_\_\_ Contract Number Address Mo. Project Term Address \_\_ Authority Goal: MBE \_\_\_\_\_(%) Address Authority Goal: WBE \_\_\_\_\_ Work Description REQUIRED WAIVER INFORMATION DOCUMENTATION D. If the form does not provide adequate space for a complete response to any item, attach additional pages as required to provide the complete information requested. If any information request item is not applicable to your Company, insert "n/a" on the first blank information request line. Whenever a request is made for a particular document in an applicable information request and the requested document is not attached, the Request For Waiver will be deemed non-responsive, incomplete and will be rejected. Complete the following for certified minority- and women-owned business enterprises that were solicited 1. in writing to provide services or bids on the Project identified above for purposes of complying with the Authority's goal requirements. Attach a copy of each solicitation for each certified firm listed. Attach a copy of each written solicitation response received from any minority-owned business, MBE, or woman-owned business, WBE. Date \_\_\_\_\_ Firm Name Trade \_\_\_\_\_ Address Check certified firm type: City, State ☐ MBE ☐ WBE Contact Firm Name Trade \_\_\_ Address Check certified firm type: City, State ☐ MBE ☐ WBE Contact Date Firm Name Trade \_ Address Check certified firm type: City, State ☐ MBE ☐ WBE Contact Form: AAPSERV5, Revision 1, 10-06-93

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Form: AAPSERV5, Revision 1, 10-06-93

#### 1. Utilization Plan; Waivers.

- a. The ARCHITECT shall submit to the Owner a Utilization Plan on forms provided by the Owner within the time-frame stated in the Supplement To information For Bidders. The Utilization Plan shall list all SUBCONSULTANT's and suppliers the ARCHITECT intends to use on the Contract and indicate which ones are M/WBEs. The Utilization Plan shall be prepared to achieve the participation goals indicated in the bid documents.
- b. The Owner will review the Utilization Plan and will issue to the ARCHITECT a written notice of acceptance or deficiency within twenty (20) days of its receipt. A notice of deficiency shall include (i) the name of any M/WBE which is not acceptable for the purpose of complying with the M/WBE participation goals and the reasons why it is not acceptable; (ii) elements of the Contract scope of work which the Owner has determined can be reasonably structured by the ARCHITECT to increase the likelihood of participation in the Contract by M/WBEs; and (iii) other information which the Owner determines to be relevant to the Utilization Plan.
- business days of receipt by submitting to the Owner a written remedy in response to the notice of deficiency. If the written remedy which is submitted is not timely or is found by the Owner to be inadequate, the Owner shall notify the ARCHITECT and direct the ARCHITECT to submit, within five (5) business days, a request for a partial or total waiver of M/WBE participation goals on forms provided by the Owner. Failure to file the waiver form in a timely manner may be grounds for disqualification of the bid.
- M/WBE SUBCONSULTANT's and suppliers prior to submitting its Utilization Plan may submit a request for waiver at the same time it submits its Utilization Plan. If a request for waiver is submitted with the Utilization Plan and is not accepted by the Owner at that time, the provisions of clauses (b) and (c), regarding the notice of deficiency and written remedy will apply. In this case, the ARCHITECT may submit a second request for waiver as directed by the Owner.
- e. If the ARCHITECT does not submit a Utilization Plan, remedy deficiencies in a Utilization Plan, submit a request for waiver, or if the Owner determines that the Utilization Plan does not indicate that the M/WBE participation goals will be met and/or that the ARCHITECT has failed to document good faith efforts, the Owner may disqualify the ARCHITECT as being not-responsible.
- f. The ARCHITECT shall attempt to utilize, in good faith, any MBE or WBE identified within its Utilization Plan, at least to the extent indicated in the Plan.

# 2. Administration Hearing on Disqualification

- a. If the Owner disqualifies a bid for any of the reasons set forth in (1) (e) above, the ARCHITECT shall be entitled to an administrative hearing, on the record, before a hearing officer appointed by the Owner to review the determination of disqualification of the bid and determination of non-responsibility of the ARCHITECT.
- b. The hearing officer's determination shall be the final determination of the Owner. Such final administrative determination shall be reviewable by a proceeding brought pursuant to Article 78 of the Civil Practice Law and Rules, provided such proceeding is commenced within thirty (30) days of notice given by certified mail, return receipt requested, rendering such final administrative determination in accordance with the provisions of Section 313 of the Executive Law.

#### 3. Good Faith Efforts

In order to show that it has made good faith efforts to comply with the M/WBE participation goals of this Contract, the ARCHITECT shall submit such documentation as will enable the Owner to make a determination in accordance with the criteria set forth in Section 313 of the Executive Law and the Rules and Regulations promulgated thereunder.

#### 4. Compliance Reports

The ARCHITECT shall submit, and shall require SUBCONSULTANT's to submit, compliance reports on forms and at intervals established by the Owner. Reports not submitted at such times as required by the Owner shall be cause for the Owner to delay implementing scheduled payments to the ARCHITECT.

## 5. ARCHITECT's Failure to Meet M/WBE Participation Goals

- (a) If the ARCHITECT, after making good faith efforts, is unable to comply with a Contract's M/WBE participation goals, the ARCHITECT may submit a request for a partial or total waiver on forms provided by the Owner documenting good faith efforts by the ARCHITECT to meet such goals. If the documentation required with the request for waiver is complete, the Owner shall evaluate the request and issue a written notice of acceptance or denial within twenty (20) days of receipt.
- (b) If the Owner upon review of the ARCHITECT's Utilization Plan and compliance reports, determines that the ARCHITECT is failing or refusing to comply with the Contract's M/WBE participation goals, and no waiver has been issued in regards to such non-compliance, the Owner may issue a notice of deficiency to the ARCHITECT. The ARCHITECT must respond to the notice to deficiency within seven (7) days of receipt. Such response may include a request for partial or total waiver of M/WBE participation goals.

### 6. ARCHITECT and Owner Complaints; Arbitration

- (a) Subsequent to the award of this Contract, if the ARCHITECT submits a request for waiver of M/WBE participation goals and the Owner denies the request or fails to respond in any way within twenty (20) days of receiving it, or if the ARCHITECT has received a written determination from the Owner that the ARCHITECT is failing or refusing to comply with goals, the ARCHITECT may file a complaint with the Director, Division of Minority and Women's Development in the Department of Economic Development ("Director"), according to the provisions of Section 316 of the Executive Law. The complaint must be filed within twenty (20) days of the Owner's receipt of the request for waiver, if the Owner has not responded in that time, or within twenty (20), days of a notification that the request has been denied by the Owner or within twenty (20) days of receipt of notification from the Owner that the ARCHITECT is failing or refusing to comply with goals.
- (b) If the ARCHITECT fails or refuses to comply with goals for participation by M/WBEs as established by this Contract, the Owner may file a complaint with the Director pursuant to Section 316 of the Executive Law.
- (c) A complaint shall set forth the facts and circumstances giving rise to the complaint together with a demand for relief.
- (d) The party filing a complaint, whether the ARCHITECT or the Owner, shall deliver a copy to the other party. Both the complaint and the copy shall be delivered by either personal service or by certified mail, return receipt requested.
- (e) Upon receipt of a complaint the Director shall provide the party against whom the complaint has been filed with an opportunity to respond to the complaint. If within thirty (30) days of receipt of the complaint the Director is unable to resolve the complaint to the satisfaction of the Owner and the ARCHITECT, the complaint shall be referred to the American Arbitration Association for resolution pursuant to Section 316 of the Executive Law and the applicable requirements of Article 75 of the Civil Practice Law and Rules.
- (f) Upon conclusion of the arbitration proceeding, the arbitrator will submit to the Director his or her award regarding the alleged violation of the Contract or refusal of the Owner to grant a waiver request by the ARCHITECT. The award of the arbitrator with respect to the alleged violation of the Contract or the refusal of the Owner to grant a waiver shall be final and may be vacated or modified only as provided by Article 75 of the Civil Practice Law and Rules.
- (g) Upon conclusion of the arbitration proceedings and the rendition of an award, the arbitrator will also recommend to the Director a remedy including, if appropriate, the imposition of sanctions, fines or penalties.

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The Director will either (i) adopt the recommendation of the arbitrator; (ii) determine that no sanctions, fines or penalties should be imposed; or (iii) modify the recommendation of the arbitrator, provided that such modification shall not expand upon any sanction recommended or impose any new sanction, or increase the amount of any recommended fine or penalty.

- (h) The Director, within ten (10) days of receipt of the arbitrator's award and recommendations, will issue a determination of such matter and shall cause a copy of such determination to be served upon the respondent by personal service or by certified mail, return receipt requested. The determination of the Director as to the imposition of fines, sanctions, or penalties shall be reviewable pursuant to Article 78 of the Civil Practice Law and Rules.
- (i) The determination of the Owner or the ARCHITECT to proceed with a complaint shall not preclude the Owner, in its discretion, from pursuing any other remedies which it may have pursuant to law and contract.

#### 7. Subcontracts

The ARCHITECT will include the provisions of paragraphs three (3.) and six (6.) above in every subcontract, in such manner that such provisions will be binding upon the SUBCONSULTANT as to work in connection with this Contract.

- E. The following forms are to be used in submitting Affirmative Action Plans and are hereby made a part of the Contract:
  - 1. ARCHITECT's Utilization Plan, Minority &

Female (EEO-1)

- 2. ARCHITECT's Utilization Plan (EEO-6)
- 3. Bid-Contract Activity Summary (EEO-6b)
- 4. Six-Month Utilization Workforce Projection Schedule (EEO-7)
- 5. ARCHITECT's Permanent Employee

Distribution (EEO-8)

- 6. Compliance Report (SC11A)
- 7. Request for Waiver (Waiver)

## 16. N.Y.S. UNIFORM CONTRACTING OUESTIONNAIRE

- A. In order to assist the OWNER in determining the responsibility and reliability of the vendor selected for the Contract and to effectuate the directives of Executive Order No. 125, the Council of Contracting Agencies has adopted procedures to collect and exchange relevant information among Contracting Agencies.
- B. When directed by the OWNER, prior to the award of any Contract valued at \$10,000 or more, the selected vendor shall, within ten (10) days following either oral or written notice that it must comply, submit, in the form provided by the OWNER, a duly executed Uniform Contracting Questionnaire to the OWNER at the following address:

Dormitory Authority -- State of New York Uniform Contracting Questionnaire Responsibility Information Officer 161 Delaware Avenue Delmar, New York 12054-1398

- C. The information contained in the Uniform Contracting Questionnaire will serve as an informational resource to aid the OWNER in making an award determination.
- D. Duly executed Uniform Contracting Questionnaires submitted to the OWNER or any other Contracting Agency shall be effective for a period of one year from their execution provided that the facts attested therein have remained unchanged.
- E. The ARCHITECT may submit a copy of a previously executed Uniform Contracting Questionnaire if it is submitted within one year of its Date of Execution and provided that it is accompanied by a duly executed Affidavit of No Change on the form supplied by the OWNER.

### 17. > INVALID PROVISIONS

If any term or provision of the Contract Documents or the application thereof to any person, firm or corporation, or circumstance shall, to any extent, be determined to be invalid or unenforceable, the remainder of the Contract Documents, or the application of such terms or provisions to persons, firms or corporations, or circumstances other than those to which it is held invalid or unenforceable, shall not be affected thereby and each term or provision of the Contract Documents shall be valid and be enforced to the fullest extent permitted by law.

### 18. NONCOMPLIANCE

This Agreement may be void and of no effect unless the ARCHITECT complies with each of the provisions of these ADDITIONAL ITEMS.

PRODUCER	THIS CERTIFICATE IS RISUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT
Local Agent	AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
and the second s	COMPANIES AFFORDING COVERAGE
INSURED	COMPANY A Your Insurance Company
	COMPANY B Your Insurance Company
Your Name	COMPANY C Your insurance Company
	COMPANY D Your Insurance Company
	COMPANY E Your Insurance Company

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

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	X Include Independent Contractors		] [		FIRE DAMAGE (Any one fire)	\$ 50,000
	X XCU Coverage				MED EXP (Any one person)	\$ 5,000
	AUTOMOBILE LIABILITY X ANY AUTO				COMBINED SINGLE LIMIT	\$1,000,000
B	X ALL OWNED AUTOS X SCHEDULED AUTOS	ABC-345	04/01/XX	04/01/XY	BODILY INJURY (Per Person)	\$1,000,000
	X HIRED AUTOS X NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$1,000,000
	X GARAGE LIABILITY				PROPERTY DAMAGE	\$1,000,000
	EXCESS LIABILITY				EACH OCCURRENCE	\$1,000,000
	X UMBRELLA FORM	LLL-555	04/01/XX	04/D1/XY	AGGREGATE	\$1,000,000
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	AND				EACH ACCIDENT	\$ 100,000
D	EMPLOYERS' LIABILITY	WCP-678	04/01/XX	04/01/XY	DISEASE - POLICY LIMIT	\$ 100,000
					DISEASE - EACH EMPLOYEE	\$ 100,000
·	OTHER					
E	NYS Disability Benefits	DBL-910	04/01/XX	04/01/XY	STATUTORY	Limit: \$2,000,000
F	Professional Liability	PPL-111	04/01/XX	04/01/XY	1	SIR: 100,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS Waiver of Subrogation for Workers Comp. & General Liability	
DASNY CONTRACT NO	

CERTIFICATE HOLDER.	
Dormitory Authority-State of New 161 Delaware Avenue	/ York
Delmar NY 12054	

Attn: Risk Management Unit

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE AUTHORIZED REPRESENTATIVE

Your Representative \* ACORD 25-5 (7/98) 

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AUTHORIZED REPRESENTATIVE
Your Representative

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						Your Representative	

# Case 1:07-cv-robustycout.C untrigues mention in the consultant's UTILIZAT. IN PLAN

#### **DORMITORY AUTHORITY - STATE OF NEW YORK**

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City		State Zip	
	Contact Person	Telephone	<del></del>
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Case 1:07-cv-06915-DLC Document 9-5 Filed 10/01/2007 Page 19 of 24

# CONSULTANT'S UTILIZATION PLAN

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## CONSULTANT'S PERMANENT EMPLOYEE DISTRIBUTION

# DORMITORY AUTHORITY - STATE OF NEW YORK

CON	SULTANT ID	ENTIFICAT	TION								
	Firm							Fed II	D No.		
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	Address						<u>:</u>				
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Form:	AAPSERV2, Revi	sion 1, 10-06-93	i			1					

# CONSULTANT'S BID-CONTRACT ACTIVITY SUMMARY WITH MINORITY- AND WOMEN-OWNED BUSINESS ENTERPRISES

#### **DORMITORY** AUTHORITY - STATE OF NEW YORK

Office For Affirmative Action One Penn Plaza, 48th Floor New York, New York 10119-0118

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Signature of Principal or Officer	Type Name of Principal or Officer	Туре	Title of Principal or Office	ar
	Signature of Principal or Officer	Date	<del></del>	

Form: AAPSERV3, Revision 2, 10-06-93

# CONSULTANT'S COMPLIANCE REPORT

DORMITORY AUTHORITY - STATE OF NEW YORK

NSULTANT IDENTIFICATION		E-J ID M-
	<del> </del>	Fed ID No
Address		
Address		<del></del>
		tate Zip
Contact Person	To	elephone
OJECT INFORMATION		
	C	ontract Amount \$
		ontract Number
Work Description		stimated
Completion Percent: 25%	□ 50% □ 75% • 100% C	ompletion Date
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NORITY- AND WOMEN- OV	VNED BUSINESS CONTRACT STATUS	SUMMAKI
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Work Description:		End Date (Est)
Type Name of Principal or Officer	Type Title o	of Principal or Officer
6'	Date	•
Signature of Principal or Officer	Dine	

# CONSULTANT'S REQUEST FOR WAIVER

DORMITORY AUTHORITY - STATE OF NEW YORK Office For Affirmative Action One Penn Plaza, 48th Floor New York, New York 10119-0118

A.	TYPE OF W	AIVER REQUEST:	□ Total	☐ Partial. If Partial, complete blanks be MBE Waiver (%) Requested	<del></del>
В.	CONSULTA Firm		<del>_</del>		
	Address	<del></del>		·	
	City	Contact Person		State Zip Telephone	
C.	PROJECT			Contract Amount \$	
	Project				
	Address			Contract Number Project Term	Mo
	Address				(%)
	Address		<del></del> <del>-</del>	Authority Goal: WBE	(%)
	Work Descrip	ption			
	1. Comp in <u>writ</u> Autho copy	ting to provide services or	ified minority- and roids on the Projec	women-owned business enterprises that were so t identified above for purposes of complying w ch solicitation for each certified firm listed. A ved from any minority-owned business, MI	vith the Attach a
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Form:	Contac AAPSERV5, Rev		1	<del></del>	

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	City, State	
	Contact	
	Firm Name	Date
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	City, State	Check certified firm type:
	Contact	
2.	other documentation made available to certifie	numents, contract documents, plans, specifications and/or d minority- and women-owned businesses for the purposes dates and manner in which these documents were made
<ol> <li>4.</li> </ol>	undertaken for purposes of complying with the  Attachment(s) provided  Not Applicable	,
	undertaken for purposes of complying with the  Attachment(s) provided  Not Applicabl  Provide a statement of justification to supp	Authority's goal requirements.
	undertaken for purposes of complying with the  Attachment(s) provided  Not Applicabl  Provide a statement of justification to supp	Authority's goal requirements.
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Form: AAPSERV5, Revision 1, 10-06-93